

# PUBLIC HEALTH REPORT

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## Malnutrition in California

IS MALNUTRITION POSSIBLE in the Nation's No. 1 agricultural state, in these years of abundance? The answer is yes. One may eat but not enough; one may eat enough but lack variety; one may be overweight but undernourished. Where is the evidence? It is largely missing. General data can substantiate the above, but specific information on the extent of malnutrition today in the various states is not yet available.

Should we be concerned? Recent findings on food consumption and hunger in the United States have implicated California. In the report "Hunger USA," released this spring by the Citizens' Board of Inquiry into Hunger and Malnutrition in the United States, eight counties in the San Joaquin Valley were classified as having "serious hunger problems." This study was generated by widely publicized eyewitness accounts of starvation in Mississippi by a Senate subcommittee, and by a group of physicians sponsored by the Field Foundation.

The question of whether conditions found in Mississippi prevailed nationally prompted the Citizens' Crusade Against Poverty to establish an independent board of inquiry to obtain such information. The evidence presented in the report was obtained from hearings held in five states, from information supplied by government and private agencies, food industries and physicians.

At the same time, the U.S. Department of Agriculture released findings of its 1965 survey of the food consumption in a nationwide sampling

of 7,500 households. The data indicated that fewer households had good diets in 1965 than in 1955. In California, 16 percent of the state's households had poor diets. This represented 860,000 households or approximately 3,000,000 people.

A third report, "Their Daily Bread," dealing with poverty and hunger in the United States, was published during the year. It stresses the failure of the National School Lunch Program to meet the objective of the original legislation—"to safeguard the health and well-being of the nation's children." The program was intended "to supply lunches without cost or at a reduced cost to all children who are determined by local authorities to be unable to pay the full price thereof" without discrimination. Yet the report shows that only 39,647 school children in California of a total of 396,632 in need benefited. The Church Women United, National Board of YWCA, and the National Councils of Catholic, Jewish, and Negro Women sponsored the investigation.

What do these findings mean in terms of health for Californians? An adequate determination of the effect of poor diets and hunger on state of health requires that the nutritional status of individuals be assessed. This calls for a physical examination, biochemical determinations and a dietary evaluation. Since no study of this magnitude was undertaken, precise information on the extent to which malnutrition is undermining the people's health is not known.

Congressional hearings on the implications of the reports started some action. The Secretary of Health, Education and Welfare was directed to determine the "state of nutrition" in poor areas of nine states: Texas, Louisiana, Michigan, Kentucky, New York, West Virginia, Massachusetts, Washington and California. Only areas in the lower one-fourth income levels of the nation are eligible for such investigation.

Studies are now under way in five states and will start soon in the remaining four. They are directed by Arnold E. Schaefer, Ph.D., Chief of the Nutrition Program, Public Health Service. The work here will survey 5,000 California families (about 20,000 persons) for clinical evaluation of their physical state and food practices. The University of California and other universities in the state will collaborate in the study, with the expectation that more information than the federal study requires will also be gathered and put to use. At this date, we are hopeful that sufficient funds will

be available to start the survey in California by early 1969.

Public concern in California continues to grow over the probability that malnutrition actually is occurring in part of the population in our fertile state. Health and medical professionals, both in the public and private sectors, share with other concerned Californians the responsibility to see that malnutrition in California is brought to an irreducible minimum. The federal survey should provide the information needed to improve the diet of our three million residents suspected of being ill fed.

#### CLASSIFICATION OF BREAST CANCER

"In the pathological classification [of breast cancer] . . . , we found it very practical to label the different levels in the axilla. A fair number of institutions are doing this now: using a metal tag to delineate the lower third, middle third, and upper third of the axilla. We usually put one tag at the tendon of the pectoral major muscle. That's level one. Level two is behind the pectoralis minor muscle, and level three is the apex. This enables the pathologist to separate the axillary contents into the various levels; and when he reviews the contents and reports the specimen, you have a better idea regarding prognosis, need for x-ray therapy, and so forth. If you have one node involved at level one, it's not nearly as bad a situation as if there's a node involved at level three at the periphery of your operation. We found this method to be very helpful; and in a survey of a large number of patients tagged in this way, the salvage rates with radical mastectomy were roughly 80, 60, 40, and 20 percent when, respectively, all nodes were negative, only level one was involved, only level two, and only level three. As the disease extends from the breast through the lymphatics and goes more peripherally, the prognosis falls because there's a higher chance of a systemic disease being present."

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